Washington Barley Commission				
1. Board/Commission Name (B/C)		2. Name B	/C reported under in	2001 or Unchanged 🖂
Department of Agriculture		1985	8	8
3. Agency to which B/C reports		B/C was blished	5. Number of members	
7. Summary: Primary Responsibilities: The primary responsibility of the Washington E education, and sales programs, and provide for				vertising,
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Accoun	und sources, e.g., G.	es of Funds F. State, State Building Code non-appropriated
2001-2003 Biennium Actual	\$334,153	Producer ass	essments/N	
2003-2005 Biennium Estimate	\$378,927	Producer ass	essments/N	
9. Expected consequences if Board/Comm transferred to another agency (specify), or o		I and responsibilitie	s: a) were assigned	to existing/additional staff, b) were
a) Producer support and involvement would decline.	b) This is an agri be transferred	cultural program an	d should not c)	Funding of research and marketing activities would decline affecting producer income, research efforts, and the economic viability of the industry in Washington.
10. Legal authorization: State Constitution	Article, RCW, WAC or I	ΞO	11. Legal Authorizat	ion is:
RCW 15.66 and WAC 16-530			Specific 🗌 Gene	eral
12. Appointing Authority: 5 elected by affect producer members, 1 appointed by the Director		ed by elected	13. Is Senate confirr ☐ Yes ⊠ No	nation required?
14. Does Board/Commission have subpoer	na powers?			ion member compensation class
☐ Yes ⊠ No			☐ one ⊠ two ☐	three 🗌 four
16. Required Representation:				
District 1: Chelan, Douglas, Grant, Okanogan, District 2: Whitman County - 1 producer District 3: Asotin, Benton, Columbia, Garfield, District 4: Adams, Franklin, Kittitas, and Yakim District 5: Lincoln County - 1 producer Two members representing the industry which Director of Agriculture (ex officio)	and Walla Walla counties na counties - 1 producer	s - 1 producer		
17. Federal or other mandates: None		1	8. Other existing or could satisfy the None	ganizations state, local or private, which e mandates listed in number 17:
19. Certification:				
I hereby certify via electronic	suhmittal that the about	e information is co	mnlete and correct to	n the hest of my knowledge
Mary Palmer Sullivan, Administrator	8/6/03	905 W. Riverside,	Ste. 501	(509) 456-4400
Name and Title	Date	Spokane, WA 992 Address	201	Phone

Basic Health Plan Advisory Council				
1. Board/Commission Name (B/C)		2. Name B	B/C reported under in	2001 or Unchanged 🛚
Health Care Authority		1988	14	5
3. Agency to which B/C reports		B/C was blished	5. Number o members	
7. Summary: Primary Responsibilities: This is a technical advisory committee providin Health Care Authority as representative of sup				
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Accoun 2) "A" if ap	und sources, e.g., G.I t, etc. propriated or "N" if r	es of Funds F. State, State Building Code non-appropriated
2001-2003 Biennium Actual	\$2,027	Health Service	ces Account "A"	
2003-2005 Biennium Estimate	\$3,000	Health Service	ces Account "A"	
Expected consequences if Board/Committensferred to another agency (specify), or		l and responsibilitie	s: a) were assigned t	o existing/additional staff, b) were
a) Reduced ability to gauge external perceptions and expectations for the program. Loss of periodic meetings with external experts in the health care field and employer community.		ose is specific to B relevance for any		Reduced ability to gauge external perceptions and expectations; loss of regular meetings to solicit external expert advice regarding BH issues; possible deterioriation in communication with key stakeholders.
10. Legal authorization: State Constitution	Article, RCW, WAC or E	ΕΟ	11. Legal Authorizat	ion is:
RCW 70.47.040(3)			⊠ Specific □ Gene	ral
12. Appointing Authority: Health Care Authority	ority Administrator		13. Is Senate confirm	nation required?
			☐ Yes ⊠ No	
14. Does Board/Commission have subpoer	na powers?		15. Board/Commissi	on member compensation class
☐ Yes ☒ No			one two	three four
16. Required Representation: Representatives of health care professionals, has well as consumers and those knowledgeable				rovisions, or delivery of health care services
17. Federal or other mandates: None		1	18. Other existing or could satisfy the None	ganizations state, local or private, which e mandates listed in number 17:
19. Certification: <i>I hereby certify via electror</i>	nic submittal that the abo	ove information is	complete and correct	to the best of my knowledge.
Pete Cutler, Acting Administrator Health Care Authority	7/25/03	PO Box 42700, Ol	ympia, WA 98504-270	0 (360) 923-2828
Name and Title	Date	Address		Phone

Board of Trustees, Technical Colleg Bates Technical College	je District # 28 -					
1. Board/Commission Name (B/C)			2. Name B/C reported under in 2001 or Unchanged ⊠			
		4004	_	04		
Same		1991	5	21		
3. Agency to which B/C reports		r B/C was iblished	5. Number of members	Number of meetings last biennium		
7. Summary: Primary Responsibilities: Governs the College, establishes policies, and offices of the State of Washington. Establishes and Technical Colleges. Grants diplomas and	s and monitors yearly bu	idget. Enforces ru	les and regulations set forth by the	ne State Board for Community		
8. Estimated Operating Costs	Total	İ	Sources of Fu	nds I		
(Boards/Commissions Only)	Costs	3) Enter	fund sources, e.g., G.F. State,			
		Accou				
2001-2003 Biennium Actual	92,845		ppropriated or "N" if non-appr & Local Funds	opriated		
2001-2003 Diefinium Actual	72,043	Gr State/ A	a Local Fullus			
2003-2005 Biennium Estimate	66,750	GF State/ A	& Local Funds			
9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.						
 Local citizens may lose control over the governance of Bates. 	b) The State Boa Colleges.	ard for Community	and Technical c) Again, c may be	community input and involvement lost		
10. Legal authorization: State Constitution	Article, RCW, WAC or	EO	11. Legal Authorization is:			
RCW 28B.50			Specific General			
12. Appointing Authority: The Governor.			13. Is Senate confirmation re	quired?		
			⊠ Yes □ No			
14. Does Board/Commission have subpoer	na powers?		15. Board/Commission mem	ber compensation class		
☐ Yes ☒ No			one two three] four		
16. Required Representation:						
Geographic diversity, representatives from labor	or, industry, women and	ethnic minorities.				
17. Federal or other mandates:			18. Other existing organization could satisfy the mandate None	ons state, local or private, which les listed in number 17:		
None.			INOTIC			
19. Certification: I hereby certify via electron	nic submittal that the ab	ove information is	s complete and correct to the be	est of my knowledge.		
Sally Cofchin, Interim President	7/15/03	1101 South Yaki	ma Ave./ Tacoma WA 98405	253-680-7102		
Name and Title	Date	Address	W 1 CH 1	Phone		
(This perso	n assumes responsibility	y tor accurate tran:	smittal of the above information.)			

Washington State Beef Commissio	n				
Board/Commission Name (B/C)		2. Name B	/C reported under ir	a 2001 or Unchanged 🖂	
Department of Agriculture		1969	9	10	
3. Agency to which B/C reports		ear B/C was stablished	5. Number members		3
7. Summary: Primary Responsibilities: To stabilize and build consumer demand for b	eef products while ent	hancing our industry sta	ıkeholders' well-beinç	J.	
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Account	nd sources, e.g., G.	ces of Funds F. State, State Building Code non-appropriated	
2001-2003 Biennium Actual	\$161,901	Assessment of	on cattle sales/N		
2003-2005 Biennium Estimate	\$175,740	Assessment of	on cattle sales/N		
9. Expected consequences if Board/Comm transferred to another agency (specify), or		ed and responsibilities	s: a) were assigned	to existing/additional staff, b) were	
a) Producer support and involvement would decline.	b) This is an a be transfer	agricultural program and red.	d should not c)	Funding of research and marketing activities would decline affecting produincome, research efforts, and the econviability of the industry in Washington.	
10. Legal authorization: State Constitution	Article, RCW, WAC	or EO 1	11. Legal Authoriza	tion is:	
RCW 16.67			Specific 🗌 Gen	eral	
12. Appointing Authority: Director of Agricu	lture	1	3. Is Senate confir	mation required?	
44 D. D. 110			Yes No	. , , , ,	
14. Does Board/Commission have subpoe	na powers?	Т		ion member compensation class	
☐ Yes ☐ No		L	one 🛛 two 🗌	unree 🔲 iour	
16. Required Representation:					
 2 - beef producers 2 - feeders 1 - meat packer 1 - livestock salesyard operator 2 - dairy (beef) producers 1 member designated by the Director of Agrico 	ulture (ex officio)				
17. Federal or other mandates:		1	8. Other existing or	ganizations state, local or private, whi e mandates listed in number 17:	ich
Beef Promotion Research Act and Order			None	e manuates fisteu ili flumber 17.	
19. Certification: <i>I hereby certify via electro</i>	nic submittal that the	above information is o	complete and correc	t to the best of my knowledge.	
Patti Brumbach, Executive Director	8/4/03	14240 Interurban A Seattle, WA 9816		(206) 444-290	
Name and Title	Date	Address		Phoi	1e

Board of Trustees, Community Coll Bellevue Community College	ege District # 8 -	_				
1. Board/Commission Name (B/C)			ne B/C reported under in 2001 or	Unchanged 🖂		
Same		1966	5	26		
3. Agency to which B/C reports	4. Year I estab	3/C was lished	5. Number of members	6. Number of meetings last biennium		
7. Summary: Primary Responsibilities: 1) Operate college within district. 2) Create comprehensive programs of college education and training. 3) Establish policy, provide for long- and short-range planning. 4) Employ college president. 5) Establish new facilities. 6) Establish self-supporting facilities. 7) Establish fees and charges. 8) Grant degrees and diplomas. 9) Enforce rules and regulations prescribed by the State Board for Community and Technical Colleges.						
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Acc	Sources of Fur er fund sources, e.g., G.F. State, ount, etc. if appropriated or "N" if non-appr	State Building Code		
2001-2003 Biennium Actual	41,653	Gen. Fun		орнасси		
	10.7/4					
2003-2005 Biennium Estimate	43,764	Gen. Fun	d - A			
Expected consequences if Board/Comm transferred to another agency (specify), or a second control of the co		nd responsibi	lities: a) were assigned to existin	ng/additional staff, b) were		
a) Citizen representation and oversight in the governance of public community colleges would be eliminated, as well as accountability to community.	b) Same as a)		c) Same a	s a)		
10. Legal authorization: State Constitution	Article, RCW, WAC or E	0	11. Legal Authorization is:			
RCW 18B.50.100			Specific ☐ General			
12. Appointing Authority: Governor			13. Is Senate confirmation required?			
			⊠ Yes □ No			
14. Does Board/Commission have subpoer	na powers?		15. Board/Commission meml	ber compensation class		
☐ Yes ⊠ No			one two three] four		
16. Required Representation:						
Geographical diversity within the college's distr	rict; representation by labo	r, business, w				
17. Federal or other mandates:			could satisfy the mandat	ons state, local or private, which les listed in number 17:		
None			None			
19. Certification: <i>I hereby certify via electron</i>	nic submittal that the abo	ve information	n is complete and correct to the be	est of my knowledge.		
B. Jean Floten, President Name and Title		3000 Landerh	olm Circle SE, Bellevue	(425) 564-2301 Phone		
Trainio una Titro	Duto	1441 033		i nonc		

Board of Trustees, Technical Colleg Bellingham Technical College	e Board # 25 -					
1. Board/Commission Name (B/C)		2. Name B/C	2. Name B/C reported under in 2001 or Unchanged ⊠			
Same	1991 5			34		
3. Agency to which B/C reports	4. Ye es	ear B/C was stablished	Number of members	6. Number of meetings last biennium		
7. Summary: Primary Responsibilities: The Board of Trustees has legal power and responsibilities is set forth in RCW 28B.50	sponsibility for the ope	ration of Bellingham Tecl	hnical College. A comprehen	sive statement of Board		
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Account, e	Sources of Fur d sources, e.g., G.F. State, Setc. opriated or "N" if non-appr	State Building Code		
2001-2003 Biennium Actual	28,400	G.F. State	11			
		A				
2003-2005 Biennium Estimate	32,000	G.F. State A				
9. Expected consequences if Board/Committransferred to another agency (specify), or or		•	a) were assigned to existin	g/additional staff, b) were		
a) Staff are not eligible	b) Loss of loca Board	al autonomy if transferred	I to State c) Policy D lost.	irection for the College would be		
10. Legal authorization: State Constitution	Article, RCW, WAC o	or EO 11.	Legal Authorization is:			
RCW 28B.50			Specific General			
12. Appointing Authority: Governor		13.	Is Senate confirmation re	quired?		
		\boxtimes	Yes No			
14. Does Board/Commission have subpoen	a powers?		Board/Commission memb	•		
☐ Yes ⊠ No			one two three	four		
16. Required Representation:						
RCW 28B.50.100 Each board of trustees shall the year in which appointed. In making such ap women, and racial and ethnic minorities, in the include at least one member from business and	pointments the goverr membership of the bo	nor shall give consideration and shall give consideration ards of trustees. The boats	on to geographical diversity,	and representing labor, business,		
17. Federal or other mandates:		18.	Other existing organizatio could satisfy the mandat	ns state, local or private, which		
None			N/A			
19. Certification: I hereby certify via electron	ic submittal that the a	above information is col	mplete and correct to the be	est of my knowledge.		
Gerald Pumphrey, President	July 23, 2003	3028 Lindbergh Ave.	Bellingham, WA 98225	360.738.3105 ext.		
Name and Title (This perso	Date n assumes responsibi	Address ility for accurate transmitt	tal of the above information.)	Phone		

Bicycle and Pedestrian Advisory C	Bicycling Adv	Bicycling Advisory Committee				
1. Board/Commission Name (B/C)		2. Name B/G	2. Name B/C reported under in 2001 or Unchanged			
WSDOT		1984	8	4		
3. Agency to which B/C reports		r B/C was ablished	Number of members	Number of meetings last biennium		
7. Summary: Primary Responsibilities: Advise WSDOT regarding bicycle/pedestrian-programs. Review the Department's planning and other state agencies) actions, proposals	and programming function	ons related to bicyclin	ng and pedestrians. Review o			
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs					
2001-2003 Biennium Actual	3,250.00	Fund 108 - Mo	tor Vehicle Account			
2003-2005 Biennium Estimate	3,250.00	Fund 108 - Mo	tor Vehicle Account			
Expected consequences if Board/Comm transferred to another agency (specify), or		•	: a) were assigned to existin	ng/additional staff, b) were		
 Loss of public involvement in the WSDOT Bicycle and Pedestrian Program. 		ncy can assume Bicyd dvisory Committee du	ties. betwee	ed costs due to lack of coordination n OSC, WSDOT Regions, MPOs, urisdictions and Advocacy Groups.		
10. Legal authorization: State Constitution RCW	n Article, RCW, WAC or		1. Legal Authorization is: ☐ Specific ☑ General			
12. Appointing Authority: Secretary of Tran	sportation	1;	3. Is Senate confirmation re	equired?		
]Yes ⊠ No			
14. Does Board/Commission have subpos	na powers?	1!	5. Board/Commission mem	ber compensation class		
☐ Yes ☒ No			one two three] four		
16. Required Representation:						
The Bicycle and Pedestrian Committee is req Region.	uired to have seven citize	en members represent	ting each of the WSDOT Reg	ions. Two citizens represent NW		
17. Federal or other mandates: none		18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: none				
19. Certification: I hereby certify via electro	onic submittal that the ab	oove information is co	omplete and correct to the b	est of my knowledge.		
Paula Reeves, Bike/Ped Planning Specialist	7-22-03	PO Box 47390, Oly	mpia, WA 98504	360-705-7258		
Name and Title Date Address Phon (This person assumes responsibility for accurate transmittal of the above information.)						

Board of Trustees, Community Coll Big Bend Community College	ege District # 18	-			
1. Board/Commission Name (B/C) 2. Name B/C reported up			3/C reported under in 2001 or U	Inchanged 🗵	
Same		1962	5	26	
3. Agency to which B/C reports		ear B/C was stablished	Number of members	6. Number of meetings last biennium	
7. Summary: Primary Responsibilities: 1) Operate college within district. 2) Create corange planning. 4) Employ college president. 5 degrees and diplomas. 9) Enforce rules and responsible.	i) Establish new faciliti	es. 6) Establish self-s	supporting facilities. 7) Establish fe	ees and charges. 8) Grant	
8. Estimated Operating Costs	Total	0) Enton	Sources of Fund		
(Boards/Commissions Only)	Costs	Accour	•		
2001-2003 Biennium Actual	\$20,089	2) "A" if a G.F. State	ppropriated or "N" if non-appro	priated	
2003-2005 Biennium Estimate	\$26,500	G.F. State			
9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) Loss of oversight and policy setting b) Loss of oversight and policy setting c) Loss of oversight and policy setting					
10. Legal authorization: State Constitution	Article, RCW, WAC o	or EO	11. Legal Authorization is:		
RCW 28B.50			Specific General		
12. Appointing Authority: Governor			13. Is Senate confirmation req	uired?	
			∑ Yes ☐ No		
14. Does Board/Commission have subpoer	na powers?		15. Board/Commission members of the commission members of the commissi	•	
☐ Yes ⊠ No			one two three	tour ⊠ otner	
16. Required Representation:					
RCW 28B.50.100 Members shall be residents women , and racial and ethnic minorities.	and qualified electors	of the college district.	Geographic diversity and represe	enation from labor, business,	
17. Federal or other mandates:			18. Other existing organization could satisfy the mandate	ns state, local or private, which	
None			None	3 ii3tou iii iiuiiibti 17.	
19. Certification: <i>I hereby certify via electron</i>	nic submittal that the a	above information is	complete and correct to the bes	st of my knowledge.	
K.W. Turner, VP Administrative Services	7/29/03		reet, Moses Lake, WA 98837	(509) 762-6201	
Name and Title	Date	Address		Phone	

	2. N	lame B/C reported under in 2001 or	· Unchanged 🔀
	1997	30	0
		5. Number of members	6. Number of meetings last biennium
ues relevant to the su	veillance of birt	h defects statewide.	
Total Costs	Costs 9) Enter fund sources, e.g., G.F. State, State Buildi Account, etc.		
\$0		-11 -1	
\$0			
	ed and respons	sibilities: a) were assigned to existi	ng/additional staff, b) were
b) There is no defects.	other agency t	hat handles birth c) Loss of	f valuable input from stakeholders.
Article, RCW, WAC	or EO	11. Legal Authorization is:	
		□ Specific General	
alth		13. Is Senate confirmation re	equired?
		☐ Yes ⊠ No	
na powers?		15. Board/Commission mem	nber compensation class
		one two three	four five
e State Board of Hea	Ith and physicia	ns.	
		18. Other existing organizati could satisfy the manda None	ons state, local or private, which ates listed in number 17:
submittal that the al	bove informatio	on is complete and correct to the bes	st of my knowledge.
7/21/03 Date		834, Olympia, WA 98504-7835	360-236-3553 Phone
	tes relevant to the sur substitute of the substitute of the sur substitute of the	4. Year B/C was established Just relevant to the surveillance of birth and physicial state Board of Health and physicial states are submittal that the above information 7/21/03 PO Box 47	4. Year B/C was established Total Costs Py Enter fund sources, e.g., G.F. State, Account, etc. 2) "A" if appropriated or "N" if non-apprint of defects. Sources of Fund Sources, e.g., G.F. State, Account, etc. 2) "A" if appropriated or "N" if non-apprint of the sexistic of the sexist

1. Board/Commission Name (B/C) 2. Name B/C reported under in 2001 or Unchanged □ Department of Services for the Blind 1983 7 14 3. Agency to which B/C reports 4. Year B/C was stablehold 7. Summary. Primary Responsibilities: Advise the agency or matters pertaining to administering the federal Randolph-Sheppard Act. 8. Estimated Operating Costs (RearkS/Commissions Only) 7. Summary. Primary Responsibilities: Advise the agency or matters pertaining to administering the federal Randolph-Sheppard Act. 8. Estimated Operating Costs (RearkS/Commissions Only) 7. Summary. Primary Responsibilities: Advise the agency or matters pertaining to administering the federal Randolph-Sheppard Act. 8. Estimated Operating Costs (RearkS/Commissions Only) 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. 9. NA: Required by tederal law 9. NA: Required by tederal law 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.18.200-230 12. Appointing Authority: General Election by Vendors 13. Is Senate confirmation required? Yes □ No 14. Does Board/Commission member compensation class Yes □ No No □ Interest to the best of my knowledge. Primary Commission Member of the Dest of my knowledge. Primary Commission Pr	Blind Vendors, State Committee for	•				
3. Agency to which BIC reports 4. Year BIC was established 5. Number of members 6. Number of members 7. Summary: Primary Responsibilities: Advise the agency on malters pertaining to administering the federal Randolph-Sheppard Act. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Total Costs 10) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated 2001-2003 Blennium Actual 15,000 8. Business Enterprise Account N 8. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) NA: Required by federal law b) NA: Only state agency designated by federal c) Out of compliance with federal law government to administer the program 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.18.200-230 12. Appointing Authority: General Election by Vendors 13. Is Senate confirmation required? Yes S No No Specific General General Senate Commission member compensation class Yes No Senate Confirmation State (senate) Specific Senate Confirmation state (senate) Specific Senate Confirmation state (senate) Specific Senate Confirmation state (senate) Senate	Board/Commission Name (B/C)		2. Name B/C rep	ported under in 2001 or Unc	changed 🗵	
established members last blennium Summary: Primary Responsibilities: Advise the agency on matters pertaining to administering the federal Randolph-Sheppard Act. 8. Estimated Operating Costs (Boards/Commissions Only) Total Costs 10 Enter fund sources, e.g., Gr. State, State Building Code Account, etc. 27 A-r if appropriated or *N* if non-appropriated 2001-2003 Blennium Actual 15,000 Business Enterprise Account N 2003-2005 Blennium Estimate 15,000 Business Enterprise Account N 8. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specifly), or c) were dropped. 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specifly), or c) were dropped. 9. NA: Required by federal law b) NA: Only state agency designated by federal c) Out of compilance with federal law government to administer the program 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.18.200-230 12. Appointing Authority: General Election by Vendors 13. Is Senate confirmation required? Yes \sum No 14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class Yes \sum No Ye	Department of Services for the Blind		1983	7	14	
Advise the agency on maiters pertaining to administering the federal Randolph-Sheppard Act. 8. Estimated Operating Costs (Boards/Commissions Only) Costs 10) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 27 - "A" lapspropriated or "N" if non-appropriated 2001-2003 Biennium Actual 15,000 Business Enterprise Account N 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) NA: Required by federal law b) NA: Only state agency designated by federal c) Out of compliance with federal law government to administer the program 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.18.200-230 12. Appointing Authority: General Election by Vendors 13. Is Senate confirmation required? Yes No 14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class Yes No 16. Required Representation: One member from E. Washington: Three from NW Washington; Two from SW Washington: One member at large. 17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: **Thereby certify via electronic submittal that the above Information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0033	3. Agency to which B/C reports					
(Boards/Commissions Only) Costs 10 Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated Business Enterprise Account N Business Enterprise Account N P. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. NA: Required by federal law b) NA: Only state agency designated by federal a) NA: Required by federal law b) NA: Only state agency designated by federal a) NA: Required by federal law b) NA: Only state agency designated by federal a) Specific General 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.18.200-230 Specific General 12. Appointing Authority: General Election by Vendors 13. Is Senate confirmation required? Yes No 14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class No ember from E. Washington: Three from NW Washington: Two from SW Washington: One member at large. 17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003		ministering the federal Ra	indolph-Sheppard Act.			
N Business Enterprise Account N	(Boards/Commissions Only)	Costs	Costs 10) Enter fund sources, e.g., G.F. State, State Building Code Account, etc.			
9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) NA: Required by federal law b) NA: Only state agency designated by federal c) Out of compliance with federal law government to administer the program 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.18.200-230 Specific General 12. Appointing Authority: General Election by Vendors 13. Is Senate confirmation required? Yes No 14. Does Board/Commission have subpoena powers? No 15. Board/Commission member compensation class one two three four 16. Required Representation: One member from E. Washington; Three from NW Washington; Two from SW Washington: One member at large. 17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003	2001-2003 Biennium Actual	15,000	•	e Account		
agency (specify), or c) were dropped. a) NA: Required by federal law b) NA: Only state agency designated by federal c) Out of compliance with federal law government to administer the program 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: RCW 74.18.200-230 12. Appointing Authority: General Election by Vendors 13. Is Senate confirmation required? Yes No 14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class Yes No 16. Required Representation: One member from E. Washington: Three from NW Washington: Two from SW Washington; One member at large. 17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: **Thereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003	2003-2005 Biennium Estimate	15,000	-	e Account		
RCW 74.18.200-230 Specific General General General General General Specific General General General Specific General General Ceneral Election Pequivalent Pequivalent Peps General Ceneral P	agency (specify), or c) were dropped. a) NA: Required by federal law b) NA: Only state agency designated by federal c) Out of compliance with federal law					
RCW 74.18.200-230 Specific General General General General General Specific General General General Specific General General Ceneral Election by Venume General Ceneral Ceneral Selection class General Ceneral Ceneral Selection class General Ceneral Ceneral Selection class General Ceneral Ceneral Ceneral Selection class General Ceneral Cener	10. Legal authorization: State Constitution Articl	le, RCW, WAC or EO	11. l	Legal Authorization is:		
Yes No	-	, , , , , , , , , , , , , , , , , , , ,		_		
14. Does Board/Commission have subpoena powers? ☐ Yes ☐ No ☐ two ☐ three ☐ four 16. Required Representation: One member from E. Washington; Three from NW Washington; Two from SW Washington; One member at large. 17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003	12. Appointing Authority: General Election by \	/endors	13. I	s Senate confirmation requ	uired?	
16. Required Representation: One member from E. Washington; Three from NW Washington; Two from SW Washington; One member at large. 17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003				Yes 🛛 No		
16. Required Representation: One member from E. Washington; Three from NW Washington; Two from SW Washington; One member at large. 17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003	14. Does Board/Commission have subpoena por	wers?	15. E	Board/Commission membe	r compensation class	
One member from E. Washington; Three from NW Washington; Two from SW Washington; One member at large. 17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003	☐ Yes ☒ No		\boxtimes \circ	one two three	four	
17. Federal or other mandates: 34 CFR, Section 395.14 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: None 19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003	16. Required Representation:					
19. Certification: 19. Certification: 19. Cert	One member from E. Washington; Three from	NW Washington; Two fro	m SW Washington; On	e member at large.		
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge. J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003			satisfy the mandates listed in number 17:			
J. Craig Monaghan, Manager 7/8/03 PO Box 90433, Olympia, WA 98504 360-586-0003	19. Certification:					
	I hereby certify via electro	onic submittal that the abov	ve information is complete	e and correct to the best of I	my knowledge.	
				ia, WA 98504		

Washington Blueberry Commission	n			
1. Board/Commission Name (B/C)	2. Name B/C reported under in 2001 or Unchanged ⊠			
Department of Agriculture		1969	7	8
3. Agency to which B/C reports	4. Year B/ establis		Number of members	6. Number of meetings last biennium
 Summary: Primary Responsibilities: Collect assessments, conduct and administer processing and marketing of blueberries, proving 				
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs			
2001-2003 Biennium Actual	\$18,134	Producer asses	sments/N	
2003-2005 Biennium Estimate	\$19,850	Producer asses	sments/N	
Expected consequences if Board/Comm transferred to another agency (specify), or		l d responsibilities:	a) were assigned to exis	ting/additional staff, b) were
a) Producer support and involvement would decline.	b) This is an agricul be transferred.	tural program that s	activi incon	ing of research and marketing ties would decline affecting producer ne, research efforts, and the economic ity of the industry in Washington.
10. Legal authorization: State Constitution	Article, RCW, WAC or EO	11	. Legal Authorization is:	
RCW 15.65 and WAC 16-550		\boxtimes	Specific 🗌 General	
12. Appointing Authority: 6 elected by affect Director of Agriculture	eted producers, 1 appointed I	by the 13	. Is Senate confirmation] Yes ⊠ No	required?
14. Does Board/Commission have subpoe	na nowers?			mber compensation class
✓ Yes ☐ No	na powers.		one 🛭 two 🔲 three	•
16. Required Representation:				
The six board members elected must be produ Agriculture to represent the Department and the		ointed member is a	appointed by the Director o	f
17. Federal or other mandates: None		18.	Other existing organiza could satisfy the mand None	tions state, local or private, which dates listed in number 17:
19. Certification: <i>I hereby certify via electro</i>	nic submittal that the above	e information is co	mplete and correct to the	best of my knowledge.
Dorothy J. Anderson, Secretary/Treas.	8/3/03 15	5903 Bow Hill Rd.	Bow, WA 98232	(360) 766-6150
Name and Title		ddress		Phone

Boarding Home Advisory Board					
Board/Commission Name (B/C)		2. Name l	B/C reported under in	2001 or Unchanged 🛛	
Department of Social and Health Services		2000	12	8	
3. Agency to which B/C reports		B/C was lished	Number of members	Number of meetings last biennium	
7. Summary: Primary Responsibilities: The department discusses with the advisory between comments and recommendations on these	ooard the department's				
8. Estimated Operating Costs (Boards/Commissions Only)		tal sts	Account, etc.	Sources of Funds rces, e.g., G.F. State, State Building Code ed or "N" if non-appropriated	
2001-2003 Biennium Actual	\$6,900		GF – State A		
	NOTE: Because we no funding for this c have streamlined an to be as efficient as take minutes at the r the cost provided be include time for minutes.	ommission/board we d cut our processes cossible, and do not neetings. Therefore, low does not			
2003-2005 Biennium Estimate	\$6,900		GF State A		
	NOTE: Because we no funding for this c have streamlined anto be as efficient as take minutes at the rost provided be include time for minutes.	ommission/board we d cut our processes cossible, and do not neetings. Therefore, low does not			
Expected consequences if Board/Commission agency (specify), or c) were dropped.	n were abolished and re	esponsibilities: a) were	e assigned to existing/a	dditional staff, b) were transferred to another	
a) Since the Board functions as a stakeholder advisory group consisting of members from outside of the Department, it is not possible to assign the tasks to existing/additional staff.	Department	ng homes are regulated of Social and Health Sei priate to transfer the res ncy.	rvices, it may	The Department of Social and Health Services would need to seek stakeholder comments and recommendations through other means if the Board was dropped.	
10 . Legal authorization: State Constitution RCW 18.20.260	Article, RCW, WAC	or EO	11. Legal Authorization is: ☑ Specific ☐ General		
12. Appointing Authority: Secretary or his or	r her designee		13. Is Senate confirmation required?		
,,	Ü		☐ Yes ☒ No		
14. Does Board/Commission have subpoer ☐ Yes ☒ No	na powers?		15. Board/Commiss	ion member compensation class three	
Required Representation: The advisory board must include representative resident council program, consumers, and fam.		arding home associa			
17. Federal or other mandates: None	ny representatives.			rganizations state, local or private, which e mandates listed in number 17:	
19. Certification:					
I hereby certify via electronic	submittal that the ab	ove information is c	omplete and correct to	o the best of my knowledge.	
Patricia Lashway, Director, RCS	7/16/03	Residential Care P.O. Box 45600,	Services Division Olympia 98504-5600	(360) 725-2401	
Name and Title	Date	Address	, , , , , , , , , , , , , , , , , , , 	Phone	

Board of Boiler Rules					
Board/Commission Name (B/C) Department of Labor & Industries (SCS)		2. Name 1951	B/C reported under in 5	2001 or Unchar	nged 🛛 16 meeting days 16 exam days
3. Agency to which B/C reports		r B/C was ablished	5. Number of members		Number of meetings last biennium
7. Summary: Primary Responsibilities: The board formulates definitions, rules and reg They also adopt, amend and interpret these Co Inspectors and revokes those commissions if to operating certificates in accordance with the re by acts ordered from the Department. The Boo disapproves the certification based on the evid	ulations for safe operation odes. The Board provident the Inspector is found incompleted quirements of the Admir and hears variance reque	on, maintenance, r es examinations fo competent or untru- nistrative Procedure	epair and fabrication of r the appointment of co stworthy. The Board es e Act. The Board acts	boilers and unfiront bommissions for bootstablishes fees fo as an appeal boa	ed pressure vessels. iller and pressure vessel r inspections and rd to aggrieved persons
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds 13) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated			g Code
2001-2003 Biennium Actual	\$23,500	Boiler/Pressu	re Vessel Fund 892/A	арргорписои	
2003-2005 Biennium Estimate	\$26,000	Boiler/Pressu	re Vessel Fund 892/A		
9. Expected consequences if Board/Commission agency (specify), or c) were dropped.	were abolished and resp	oonsibilities: a) were	e assigned to existing/ad	dditional staff, b) v	vere transferred to another
a) The vital link and input from the boiler and unfired pressure vessel industry we serve would be lost. Boiler Board members are required to develop rules and statewide policies relating to the inspection of boilers and unfired pressure vessels. If the Board were abolished there would no longer be a forum where this industry could communicate recommedations and issues impacting boilers and unfired pressures vessels in Washington. b) The Boiler Board has a quasi-judicial role in final legal decisions in appeals of department decisions and regulating public safety. The logical agency is Labor and Industries. Labor and Industries. b) The Boiler Board has a quasi-judicial role in final legal decisions in appeals of department decisions and regulating public safety. The logical agency is Labor and Industries. Department would lose Jurisdictional both nationally and internationally an affect approximately 100 ASME man and NB repair firms. The Boiler/Prese experience in safety would be lost.				I to the Department. The d lose Jurisdictional recognition id internationally and would ely 100 ASME manufactures ns. The Boiler/Pressure Vessel	
10. Legal authorization: State Constitution	Article, RCW, WAC or I	E0	11. Legal Authorizat	ion is:	
RCW 70.79.010			Specific ☐ General		
12. Appointing Authority: Governor			13. Is Senate confirmation required?		
			☐ Yes ⊠ No		
14. Does Board/Commission have subpoena powers?			15. Board/Commission member compensation class		
☐ Yes ☒ No			one □ two □ three □ four □		
16. Required Representation: One Owner/User of boilers and unfired pressure vessels, one representative of boiler or unfired pressure vessel manufactures, one representative of a boiler insurance company registered in this state, one mechanical engineer on the faculty of a recognized engineering college or a graduate mechanical engineer having equivalent experience, and one representative of the boilermakers, stationary operating engineers, or pressure vessel operator.					
17. Federal or other mandates: none			18. Other existing or could satisfy the none		e, local or private, which d in number 17:
19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.					
Robb Marvin Chief Boiler/Pressure Vessel Inspector	7/15/2003		or and Industries ce Services/Boilers ympia, WA 98504-4410		360.902.5270
Name and Title (This pe	Date erson assumes responsibili	Address ty for accurate transr	nittal of the above informa	ition.)	Phone

1. Board/Commission Name (B/C) 2. Name B/C reported under in 2001 or Unchanged Washington State Department of Health 1999 16 1 3. Agency to which B/C reports 4. Year B/C was established 5. Number of meetings members Advised recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advised recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advised recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: 8. Estimated Operating Costs (Boards/Commissions Only) 8. Estimated Operating Costs (Boards/Commission Soluty) 8. Estimated Operating Costs (Boards/Commission Were and cervical Health program. 8. Estimated Operating Solutions (Boards/Commission Were Account, etc. (2) "A" if if appropriated or "N" if non-appropriated or "N" if non-appro						
3. Agency to which B/C reports 4. Year B/C was established 5. Number of members 6. Number of members 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commission Norly) 8. Estimated Operating Costs (Boards/Commission Norly) 8. Estimated Operating Costs (Boards/Commission Were appropriated or "N" if non-appropriated or "N" if						
3. Agency to which B/C reports 4. Year B/C was established 5. Number of members 6. Number of members 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commission Norly) 8. Estimated Operating Costs (Boards/Commission Norly) 8. Estimated Operating Costs (Boards/Commission Were appropriated or "N" if non-appropriated or "N" if						
established members last biennium 7. Summary: Primary Responsibilities: Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only) 8. Estimated Operating Costs (Boards/Commissions Only) 9. Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 201-2003 Biennium Actual 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) not an appropriate staff function b) no other appropriate agency c) stakeholder input critical 10. Legal authorization: State Constitution Article, RCW, WAC or EO Required for federal funding 12. Appointing Authority: Department of Health 13. Is Senate confirmation required? 14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class 16. Required Representation:						
Advise/recommend Washington state priorities, funding and policy for breast and cervical Health program. 8. Estimated Operating Costs (Boards/Commissions Only)						
Costs 14 Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated 2001-2003 Biennium Actual \$4,000.00 1) Federal 2) A						
2) A 2003-2005 Biennium Estimate \$4,000.00 1) Federal 2) A 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) not an appropriate staff function b) no other appropriate agency c) stakeholder input critical 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: Required for federal funding Specific Seneral 12. Appointing Authority: Department of Health 13. Is Senate confirmation required? Yes No 14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class No one two three four						
2003-2005 Biennium Estimate \$4,000.00 1) Federal 2) A 9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) not an appropriate staff function b) no other appropriate agency c) stakeholder input critical 10. Legal authorization: State Constitution Article, RCW, WAC or EO Required for federal funding Specific Seneral 12. Appointing Authority: Department of Health 13. Is Senate confirmation required? Yes Solo No 14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class Yes No No Three four						
9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped. a) not an appropriate staff function b) no other appropriate agency c) stakeholder input critical 10. Legal authorization: State Constitution Article, RCW, WAC or EO 11. Legal Authorization is: Required for federal funding Specific Seneral 12. Appointing Authority: Department of Health 13. Is Senate confirmation required? Yes No 14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class One two three four						
12. Appointing Authority: Department of Health 13. Is Senate confirmation required? □ Yes ☑ No 14. Does Board/Commission have subpoena powers? □ Yes ☑ No 15. Board/Commission member compensation class □ Yes ☑ No 16. Required Representation:						
14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class ☐ Yes ☐ No ☐ two ☐ three ☐ four 16. Required Representation:						
14. Does Board/Commission have subpoena powers? ☐ Yes ☐ No ☐ two ☐ three ☐ four 16. Required Representation:						
☐ Yes ☑ No ☐ two ☐ three ☐ four 16. Required Representation:						
17. Federal or other mandates: 18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17:						
CDC program policy mandate None						
19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.						
Pama Joyner 9/3/03 PO Box 47859 Olympia WA 98504-7859 (360) 236-3589						
Name and Title Date Address Phone (This person assumes responsibility for accurate transmittal of the above information.)						

Bridge Replacement Advisory Com	mittee						
1. Board/Commission Name (B/C)		2. Name B/C reported under in 2001 or Unchanged ⊠					
WSDOT		1985	20	4			
3. Agency to which B/C reports	4. Year E estab	3/C was lished	5. Number of members	Number of meetings last biennium			
 Summary: Primary Responsibilities: Select local agency bridges within the state for rehabilitation or replacement utilizing federal bridge replacement funds. 							
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds 15) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated					
2001-2003 Biennium Actual	0.00	Fund 108 - Motor Vehicle Account "A"					
2003-2005 Biennium Estimate	0.00	Fund 108 - N	Notor Vehicle Account				
9. Expected consequences if Board/Comm transferred to another agency (specify), or or		nd responsibiliti	es: a) were assigned to e	existing/additional staff, b) were			
 a) Loss of credibility and effectiveness. b) Cannot be transferred. Bridge replacement funds given only to DOT. c) Unable to effectively determine priority for non-state bridges with the same confidence, which exists presently. 							
10. Legal authorization: State Constitution	Article, RCW, WAC or E	0	11. Legal Authorization	nis:			
none Specific Seneral							
12. Appointing Authority: Director, Highways & Local Programs 13. Is Senate confirmation required?			ion required?				
☐ Yes ⊠ No							
14. Does Board/Commission have subpoena powers?			15. Board/Commission member compensation class				
☐ Yes ☑ No ☐ two ☐ three ☐ four							
16. Required Representation:							
Representatives from City, County and State.							
17. Federal or other mandates: none		18. Other existing organizations state, local or private, which could satisfy the mandates listed in number 17: none					
19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.							
Operations Engineer, H&LP	7-22-03	PO Box 47390, C	Olympia, WA 98504	360-705-7370			
Name and Title	Date	Address		Phone			

State Building Code Council					
1. Board/Commission Name (B/C) 2. Name B/C reported under in 2001 or Unchanged				yed 🖂	
Legislature (Supported by CTED)		1974	20		65
3. Agency to which B/C reports	4. Year B/ establis		Number of members	of 6.	Number of meetings last biennium
7. Summary: Primary Responsibilities: A. Adopt and amend the following codes: Unit Code, State Ventilation and Indoor Air Quality B. Provide opinions on the state building code C. Review local amendments to the state build level. D. Perform research on code related issues as E. Develop codes as determined by the Legisl 8. Estimated Operating Costs (Boards/Commissions Only)	Code, Historic Building Code to local code enforcement of the local code for single and multiples and some some code for single and multiples and some code for single and multiples.	e, and State Regulations for officials and provide techni tti-family dwellings to ensur	or Barrier-Fi cal assistar re level of fii Sourc	ree Facilities. ace upon request of re/life safety does r ses of Funds	f local officials. not fall below minimum
(,,		Account, etc.	ŭ		
2001-2003 Biennium Actual	1,213,506	2) "A" if appropriated or "N" if non-appropriated State Building Code Council Account Fund 084 A			
2003-2005 Biennium Estimate	1,110,500	State Building Code Council Account Fund 084 A			
9. Expected consequences if Board/Commitransferred to another agency (specify), or of	ssion were abolished and) were dropped.	l responsibilities: a) were	assigned	to existing/additio	onal staff, b) were
a) Loss of technical expertise; loss of volunteer expertise and involvement; loss of stakeholder participation		der support under Dept of L	.&I c)	rulemaking/enforce possible confliction regulation; Loss (ation with other state cement bodies, causing ng and duplicative of uniformity statewide of and energy standards
10. Legal authorization: State Constitution	Article, RCW, WAC or EO	11. Legal	Authorizat	tion is:	
RCW 19.27, 19.27A, 70.92					
12. Appointing Authority: Governor 13. Is Senate confirmation requ			mation required?		
☐ Yes ⊠ No					
14. Does Board/Commission have subpoen	15. Board/Commission member compensation class				
☐ Yes ⊠ No				three four	
16. Required Representation: 2 city elected commercial/industrial contractor, structural eng disabled community, general public. Also, ex-community, general public.	ineer, mechanical engineer,	, building materials manufa	cturer/supp	lier, architect, cons	struction building trades,
17. Federal or other mandates: None		18. Other could None	d satisfy th	ganizations state e mandates listed	local or private, which in number 17:
19. Certification: I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.					
Tim Nogler Managing Director Name and Title		O Box 48300, Olympia WA	98504		(360) 725-2969 Phone

Washington Bulb Commission					
Board/Commission Name (B/C)			e B/C reported under in 200°	1 or Unchanged 🗵	
Department of Agriculture		1956	8	5	
3. Agency to which B/C reports		7/20 / Cear B/C was 5. Number of 6. Number of 1/20 / Cear B/C was 5. Number of 1/20 / Cear B/C was			
7. Summary: Primary Responsibilities: Collect assessments and fund research ben	efiting the flower bulb inc	dustry.			
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds 17) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated			
2001-2003 Biennium Actual	\$37,766	Producer a	assessments on tulips, iris a	and daffodils/N	
2003-2005 Biennium Estimate	\$27,801	Producer	assessments on tulips, iris a	and daffodils/N	
9. Expected consequences if Board/Com transferred to another agency (specify), of a)Producer support and involvement	r c) were dropped.	d and responsibil gricultural program	-	xisting/additional staff, b) were	
would decline.	be transferr		ded eco	cline affecting research efforts and conomic viability of the industry in ishington.	
10. Legal authorization: State Constitution	n Article, RCW, WAC o	or EO	11. Legal Authorization i	S:	
RCW 15.65 and WAC 16-524			Specific ☐ General		
12. Appointing Authority: 5 elected by affer producer members, 1 appointed by the Direction		nted by elected	13. Is Senate confirmatio ☐ Yes ☐ No	on required?	
14. Does Board/Commission have subpo	ena powers?			nember compensation class	
☐ Yes ☒ No		☐ one ☑ two ☐ three ☐ four			
16. Required Representation:					
Producer of tulips, iris and narcissus bulbs g District 1: Skagit, Snohomish, Whatcom, an District 2: All other counties - 2 positions District 3: Entire state of Washington - 1 pos 2 members appointed by the elected product Director of Agriculture (ex officio)	d Island counties - 2 pos ition	iltions			
17. Federal or other mandates:			could satisfy the ma	zations state, local or private, wl indates listed in number 17:	
None			None		
fication: I hereby certify via electronic subi	mittal that the above info	ormation is compl	ete and correct to the best of	f my knowledge.	
Mike Shelby, Secretary	7/30/03	2017 Continent Mount Vernon,	(360) 424-73		
Name and Title	Date	Address	nsmittal of the above informat	Pho	

Byrne Grant Advisory Committee						
1. Board/Commission Name (B/C)	2. Name B/C reporte	2. Name B/C reported under in 2001 or Unchanged				
Community, Trade & Economic Development		1987	20	7		
3. Agency to which B/C reports	4. Year E estab	B/C was lished	5. Number of members	Number of meetings last biennium		
 Summary: Primary Responsibilities: Make program and funding recommendations t Grant funds for drug and violent crime control a 			e legislature concerning	g utilization of Byrne Formula		
8. Estimated Operating Costs (Boards/Commissions Only)	Total Costs	Sources of Funds 18) Enter fund sources, e.g., G.F. State, State Building Code Account, etc. 2) "A" if appropriated or "N" if non-appropriated				
2001-2003 Biennium Actual	\$7,633	Federal-Byrne Admin A				
2003-2005 Biennium Estimate	\$6,584	Federal-Byrne Admin A				
9. Expected consequences if Board/Commission were abolished and responsibilities: a) were assigned to existing/additional staff, b) were transferred to another agency (specify), or c) were dropped.						
a) Violation of federal grant's policy and procedure b) Violation of federal grant's policy and procedure c) Violation of federal grant's policy and procedure						
10. Legal authorization: State Constitution Article	e, RCW, WAC or EO	11. Lega	Il Authorization is:			
N/A		☐ Spec	cific General			
12. Appointing Authority: Director, Department of Community, Trade & Economic Development 13. Is Senate confirmation required? ☐ Yes ☑ No						
14. Does Board/Commission have subpoena powers? 15. Board/Commission member compensation class			compensation class			
☐ Yes ☐ No ☐ one ☐ two ☐ three ☐ four						
16. Required Representation: Law enforcement, prosecutors, judges/court permembers include representatives of the US Att				abuse experts. Highly encouraged		
17. Federal or other mandates: Byrne Formula Grant Policy and Procedure Guide 18. Other existing organizations state, local or private, we satisfy the mandates listed in number 17: None						
19. Certification:						
I hereby certify via electronic submittal that the above information is complete and correct to the best of my knowledge.						
William H. Johnston		Community, Trade & Economic Development 360-725-30 P.O. Box 48350 Olympia, 98513-8350				
Name and Title		Address		Phone		